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FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Board of Patent Appeals and Interferences (Official Copy)	Paul D. Amrozowicz
COMPANY:	DATE:
USPTO	MARCH 11, 2008
FACSIMILE NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
571 273-8300	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	H0003211 (002.0229)
RE:	RECIPIENT'S REFERENCE NUMBER:
Notice of Hearing	10/630,684

URGENT

FOR REVIEW

PLEASE COMMENT

PLEASE REPLY

PLEASE RECYCLE

NOTES/COMMENTS:

**FORMAL COMMUNICATION
INTENDED FOR ENTRY**

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MAR 11 2008

Page 1



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Board of Patent Appeals and Interferences

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U.S. PATENT AND TRADEMARK OFFICE
BOARD OF PATENT APPEALS
AND INTERFERENCESHoneywell International Inc.
Law Dept. AB 2
P.O. Box 2245
Morristown, NJ 07962-9806

Appeal No: 2008-0878
 Appellant: Magdy Salama et al.
 Application No: 10/630,684
 Hearing Room: A
 Hearing Docket: B
 Hearing Date: Thursday, April 10, 2008
 Hearing Time: 09:00 AM
 Location: Madison Building - East Wing
 600 Dulany Street, 9th Floor
 Alexandria, Virginia 22313-1450

NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: ☐ HEARING ATTENDANCE CONFIRMED☒ HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel: _____

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